ANNUAL REPORT

Regional Water Quality Control Board Santa Ana Region

(Order No. R8-2013-0001, NPDES No. CAG018001)

Reporting Period:

January 1, 2014 through December 31, 2014

Report Due Date:

CAFO Operator's Name

January 15, 2015

FACILITY INFORMATION (Please make any corrections directly on this form)

Dickie Vander Meulen



CAFO Facility Name	ne IIVA Dairy
Facility Address	
Mailing Address	Ex. 6 Personal Privacy (PP)
Telephone Number	
ANIMAL POPULAT	TION (Please provide the number of animals in each category)
	OO Dry Cows <u>355</u> Heifers S Calves S
Ostoro (opcony type	
MANURE INFORM	IATION Units Used: Tons Cubic Yards
Manure Produced	5965.5 Manure Spread on Cropland at Facility
Manure Spread on (Other Cropland
Manure Stockpiled	on Site as of 12/31/14 22
Manure Hauled Awa	ray (Also provide Manure Tracking Manifests, Form 4) 7242.0
Was Manure Amour	int Calculated Using the Following Factors? Yes_XNo
1 Milking cow produces a	approximately 4.1 tons of manure per year
1 Dry cow produces appr	proximately 4.1 tons of manure per year
· ·	oximately 1.5 tons of manure per year
1 Calf produces approxin	mately 0.6 tons of manure per year
*1 ton of corral manure e	equals 2.32 cubic yards and 1 cubic yard of corral manure equals 0.43 tons
LOGGED	ENTER DAIRY DB Scanned into file
	1-70-15

CROP GROWING ACTIVITY Number of cropland acres where manure has been applied (Cropland is contiguous to the dairy, where manure was applied and a crop was harvested). Cropland acres: No. of plantings per year: One Two Three Type of crops grown: Sudan grass Alfalfa Winter wheat Barley Bermuda grass corn Oats Turf Grass Vegetables Others Actual crop yields Manure application rates Amount of manure spread on each field Number of Milkings per day (Dairies only): Three
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Sudan grass Alfalfa Winter wheat Barley Bermuda grass corn Oats Turf Grass Vegetables Others Actual crop yields Manure application rates Amount of manure spread on each field Number of Milkings per day (Dairies only): One Two Three
Barley Bermuda grass corn Oats Turf Grass Vegetables Others Actual crop yields Manure application rates Amount of manure spread on each field Number of Milkings per day (Dairies only): One Two Three
Vegetables Others Actual crop yields Manure application rates Amount of manure spread on each field Number of Milkings per day (Dairies only): One Two Three
Actual crop yields Manure application rates Amount of manure spread on each field Number of Milkings per day (Dairies only): One Two Three
Manure application rates Amount of manure spread on each field Number of Milkings per day (Dairies only): One Two Three
Amount of manure spread on each field
Number of Milkings per day (Dairies only): OneTwoThree
COMMENTS:
CERTIFICATION:
I certify under penalty of law that this document and all attachments were prepared under my direction of accordance with a system designed to assure that qualified personnel properly gather and evaluate the informassed on my inquiry of the person or persons who manage the system, or those persons directly responsible information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete, there are significant penalties for submitting false information, including the possibility of fine and imprison violations.
Name of person making this report (please print): <u>T magene Troost</u> Signature: <u>Pragone Woost</u>
orgination. The state of the st
Date: 1/7/15 Title: Secretary

Form 2. Summary Report of Weekly Storm Water Management Structure Inspections (Order No. R8-2013-0001, NPDES No. CAG018001)

January 1, 2014 through December 31, 2014

Reporting Period:

Facility Information (Please make corrections directly on this form) Dickie Vander Meulen Operator's Name TIVA Dairy **Facility Name** Ex. 6 Personal Privacy (PP) **Facility Address** Was the CAFO Weekly Storm Water Management Structure Inspections Log Sheet completed for the entire year? Yes 💹 No 🗌 If No, please explain why the log sheet was not completed for the entire year. Were water lines inspected daily? Were there any discharges from the facility during the year? Yes If Yes, please provide: the date of discharge, how it was discovered (was it during a routine site inspection?), how long did the discharge last, and how it was stopped. Date of incident How was it discovered? How long did it last and volume How was it stopped? none to report Certification: I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. Name of person making this report (please print): ___magene

Form 1. CAFO Weekly Storm Water Management Structure Inspections Log Sheet (Order No. R8-2013-0001, NPDES No. CAG018001)

Reporting Period: January 1, 2014 through December 31, 2014

Facility Information (Please make corrections directly on this form)								
Operator's Name:	Operator's Name: Dickie Vander Meulen							
Facility Name:	TIVA Dairy							
Facility Address:	Ex. 6 Personal Privacy (PP)							

Instructions: Use this form to keep track of weekly visual inspections of your process wastewater and storm water containment structures. Document the findings of daily storm event inspections. List the structure items that need to be inspected below (refer to your Engineered Waste Management Plan).

none to report	

Keep track of your inspections in the following table by completing one row each week when you inspect your process wastewater and storm water containment structures. Provide the following information: date of inspection, initials of the person performing the inspection, check "OK" box if no problems were found, use the "Notes" column to describe problems, if you find any, and how they were fixed, record the estimate of the wastewater containment pond(s) freeboard, fill in the "Date Corrected" column with the date when you correct the problem.

	re Tracking Manifest ional Water Quality Control Board	
	Total Valor Quarty Control Doug	A, :
 Complete one manifest for each hauling event, for each manure is being hauled to the same destination. If there are multiple destinations, complete a separat The operator must obtain the signature of the hauler of the operator shall submit manure tracking manifest(staggional Water Quality Control Board. 	e form for each destination. upon completion of each manure hauling e	vent.
Operator Information		
Name of the Operator: Dicke Vander 1	Neulen	
Name of Facility: Tiva Daisy		
Facility Address: Ex. 6 Per	rsonal Privacy (P	P)
Mailing Address: Same		
Phone Number:		
Manure Hauler Information		
Name of Hauling Company and Contact Person:		Phone Number:
D.) ARIAS TRUCMING	JOE AMAI	909-762-7796
Destination Information		
Hauled To (please check one):	Dates Hauled: 11/18/19	
Composting Facility	Please give the name and location of the	. 0 .
Regional Digester	manure was hauled to cropland, the owne address, or nearest cross streets.	er or tenant, and the destination
Riverside County	A STATE OF THE STA	
San Bernardino County	Ke 1/099	VIII VIII VIII VIII VIII VIII VIII VII
Other County:	\cup	
		WWW. The transfer of the trans
Please enter the amount in the box below and circle the Amount Removed from Facility: Amount Com	* * *	to Digester:
875 Tons of Cubic Yards	Tons or Cubic Yards	Tons or Cubic Yards
Certification I certify under penalty of law that this document and accordance with a system designed to assure that qualify Based on my inquiry of the person or persons who man information, the information submitted is, to the best of nothere are significant penalties for submitting false informations. Operator's Signature: Dit 4/2 Vanda Mey L	fied personnel properly gather and evalua- lage the system, or those persons directly my knowledge and belief, true, accurate, a nation, including the possibility of fine an	ate the information submitted. Tresponsible for gathering the and complete. I am aware that and imprisonment for knowing

. Manure Tracking Manifest Santa Ana Regional Water Quality Control Board e one manifest for each hauling event, for each destination. A hauling event may

- 1) Complete one manifest for each hauling event, for each destination. A hauling event may last for several days, as long as the manure is being hauled to the same destination.
- 2) If there are multiple destinations, complete a separate form for each destination.

Instructions

- 3) The operator must obtain the signature of the hauler upon completion of each manure hauling event.
- 4) The operator shall submit manure tracking manifest(s) with the Annual Report of Animal Waste Discharge to the Santa Ana Regional Water Quality Control Board.

Regional Water Quality Control Board.	•	•			
Operator Information					
Name of the Operator: Dickie Vanc	der Meulen				
Name of Facility: Tiva Dairy.	der Meulen				
Facility Address: Ex. 6 F	Personal Privacy	(PP)			
Mailing Address: Same					
Phone Number:					
Manure Hauler Information					
Name of Hauling Company and Contact Person: P. J. ANIA-1-6 SON!	DE ANIA/	Phone Number: 909-9762-7396			
Destination Information		101-4 166 1116			
Hauled To (please check one):	Dates Hauled: 4/29/14	namakan manangan sering seringan ang mananan seringan seringan seringan mengangkan mengangkan mengangkan sering			
Composting Facility	Please give the name and location of the composting operation, or, if the				
Regional Digester	manure was hauled to cropland, the owner or tenant, and the destination address, or nearest cross streets.				
Riverside County	1/0/(00 / 00 / 1				
San Bernardino County	Kellog Fertilize	No. 1997 to the contract of th			
Other County:	ON				
Please enter the amount in the box below and circle th Amount Removed from Facility: Amount Cor	* * *	nt to Digester:			
4525 Tons of Cubic Yards	Tons or Cubic Yards	Tons or Cubic Yards			
Certification I certify under penalty of law that this document and accordance with a system designed to assure that quali Based on my inquiry of the person or persons who ma information, the information submitted is, to the best of there are significant penalties for submitting false infor violations. Operator's Signature: Hauler's Signature: Hauler's Signature:	ified personnel properly gather and evalu- nage the system, or those persons directly my knowledge and belief, true, accurate, mation, including the possibility of fine a	y responsible for gathering the and complete. I am aware that and imprisonment for knowing			

Manure Tracking Manifest Santa Ana Regional Water Quality Control Board Instructions 1) Complete one manifest for each hauling event, for each destination. A hauling event may last for several days, as long as the manure is being hauled to the same destination. 2) If there are multiple destinations, complete a separate form for each destination. 3) The operator must obtain the signature of the hauler upon completion of each manure hauling event. 4) The operator shall submit manure tracking manifest(s) with the Annual Report of Animal Waste Discharge to the Santa Ana Regional Water Quality Control Board. Operator Information Dickie Vander Meulen Name of the Operator: Name of Facility: Ex. 6 Personal Privacy (PP) Facility Address: Mailing Address: Samo Phone Number: Manure Hauler Information Name of Hauling Company and Contact Person: Frias & Sons Trucking - JOE Anns Destination Information Hauled To (please check one): Dates Hauled: Composting Facility Please give the name and location of the composting operation, or, if the manure was hauled to cropland, the owner or tenant, and the destination Regional Digester address, or nearest cross streets. Kelloggbarden Kol Riverside County San Bernardino County Other County: Please enter the amount in the box below and circle the appropriate units: Amount Removed from Facility: Amount Composted: Amount to Digester: Tons of Cubic Yards Tons or Cubic Yards Tons or Cubic Yards 2, 900 I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. Operator's Signature: Dickie Vender Mey les Date: 1-7Hauler's Signature: Doctor Date: 11-14-

Form 4.	Regiona	Manure Tracking Manifest Mater Quality Control Board Santa Ana Region		- Mariana and American
	Order No. R8-2	1013-0001, NPDES No. CAG018	001	the the same and the same of t
INSTRUCTIONS: 1. Complete one manifest for each hauling even hauled to the same destination. 2. If there are multiple destinations, complete a manual street of the complete and the complete a	a separate form force of the hauler u	or each destination. Inon completion of each manure hau	ling event	is being
OPERATOR'S INFORMATION		100		<u></u>
	Vander Dairy	Mewlen	nga haran manganandan, ya ja mujupi ni manisanandajana yanay ki di yahamban mala san da di ni amba	
		ersonal Privacy	(PP)	
Mailing Address			\ <i>/</i>	
Telephone Number				
MANURE INFORMATION			The state of the s	
Manure analyzed for nutrients		Yes Z	No 🗌	
Most current nutrient analysis of manure provid	led to the recipien	nt of the manure	Yes No	
MANURE HAULER INFORMATION				~~~~
Name and Address of Hauling Company	i.	JPE FRANCO TRUCKING 2015 S PLUM AVE ONTARIO CA 91761	Phone Number: 909 - 732 - 169	1
Contact Person Name: MANURE DESTINATION INFORMATION	1	(909) 732-1692	101 134-167	<u> </u>
MANURE DESTINATION INFORMATION		Dates Haufed:	5 10	1 1 1
Hauled to (please check):		Dates Haufed: 2-17-14	2-19-1	14
Composting Facility		Kellna	s Composting Fa	باللا
Regional Treatment Facility		1 . – – – – – – – – – – – – – – – – – –	Latitude:	
Croplands in Riverside County Croplands in San Bernardino County	The state of the s	GPS Coordinates of Destination ²	Ex. 6 Personal Privacy (PP	')
Croplands in other Counties	,	Destination Receiver of Manure:	Same	
Amount removed: Tons or Cubic Yards (Please enter the amount in the box below and	circle the	Manure Quantity Delivered:	40 tons	row.
appropriate units)		Approximate Acreage (If Destination	n is Cropland)	
1,240 tons		Crop(s) Grown on Cropland		
CERTIFICATION:	ra pulga (Maragara paran - IIII) e Mili marajadhi Mili da Maragara (Maragara) e Mili da Mili da Mili da Mili d I	The state of the s		
I certify under penalty of law that this document designed to assure that qualified personnel pro- who manage the system, or those persons direc- and belief, true, accurate, and complete. I am a and imprisonment for knowing violations.	operly gather and ally responsible for nware that there a	l evaluate the information submitted. Or gathering the information, the information, the information of submitting are significant penalties for submitting	Based on my inquiry of the person or mation submitted is, to the best of my kr talse informetion, including the possibility.	persons nowledge
Operator's Signature: Dickie Vy	nder Meu	1 400ate: 1- Date: 9-28-14	7.15	
Hauler's Signature:	anco	Date: 2-28-14		



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Send To :
Tiva Dairy
Ex. 6 Personal Privacy (PP)
Ontario CA 91762

Project : Tiva Dairy Report No : Cust No : 14-352-0010

Date Printed : Date Received

12/22/2014 12/18/2014

Page : Lab Number : 1 of 2 21655

06772

Sample ld:

Tiva Dairy #1

SATURATION EXTRACT - PLANT SUITABILITY

		Negrigine	Sensitive Crops Restricted	Control Control Control Control (Control	
Salinity (ECe)	5.3 dS/m				
Sodium Adsorption Ratio (SAR)	7.09				
Somn (B)					
Sodium (Na)	17.6 meq/L				
Chloride (CI)					
Carbonate (CO3)	***************************************				
Bicarbonate (HCQ3)					
Fluoride (F)					30000000

^{*} Structure and water infiltration of mineral soils potentially adversely affected at SAR values higher than 6.

	Recut				
pH	8.9 s.u.				Low

EXTRACTABLE NUTRIENTS

		Sufficiency SOIL TEST RATINGS							
		0.0		1.00	Medium				
Available-N	43 ppm	0.2						6 ppm	
Phosphorus (P) - Olsen	534 ppm	4.0							
Potassium (K)	10490 ppm	15.9							
Potessium - sat. ext.	40.1 meg/L							37 ppm	
Calcium (Ca)	1301 ppm	0.2							
Calcium - sat. ext.	6.1 meq/L								
Magnesium (Mg)	1084 ppm	1.4	ļ						
Magnesium - sat. ext.	6.3 meq/L								
Copper (Cu)								339 meg/kg	
Zinc (Zn)								333	
Manganese (Mn)									
Iron (Fe)									
Boron (B) - sat. ext.	***************************************							D	
Sulfate - sat. ext.]				X		
Exch Aluminum									
]						

Cu, Zn, Mn and Fe were analyzed by DTPA extract.

PARTICLE SIZE ANALYSIS

			Med. to Very Fine 0.05-0.5		
111 %					

Phone Location Tr

1) Enter Any Phone Number Free 2) Get Name, Loca

GPS coordinates

Latitude and longitude of an address

Fill the address field and click on "Get GPS Coordinates" to display its **latitude** and **longitude**. Read the result of the conversion on the left column or directly on the **map**.

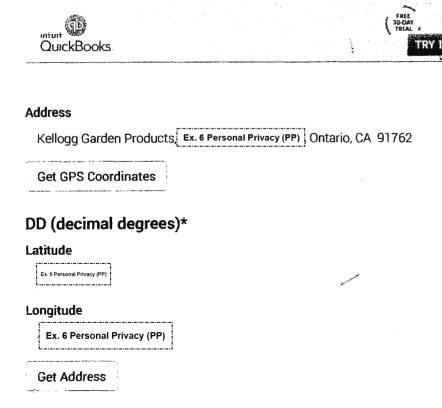
Find the address corresponding to GPS coordinates

Option 1: Fill the decimal GPS coordinates and click on the corresponding "Get Address" button.

Option 2: Fill the sexagesimal GPS coordinates and click on the corresponding "Get Address" button.

Latitude, longitude and address of any point on the map

Click directly on the map to get an address and its GPS coordinates. Latitude and longitude are displayed on the left column and on the map.



DMS (degrees, minutes, secondes)*

Latitude

Ex. 6 Personal Privacy (PP)

Get Address

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ena

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vood

* World Geodetic System 84 (WGS 84)

Ex. 6 Personal Privacy (PP)

Sée the worthern Lights

travelalberta us

Best Conditions in 10 Years. Aurora Borealis Viewing Packages.

Geolocation